

**Annual Primary Level Evaluation Procedure (3/31/04)**  
**Relates to 911 KAR 2:120 and 911 KAR 2:130**

- ◆ All children receiving First Steps services will have an Annual Primary Level Evaluation prior to the convening of their annual IFSP meeting to determine on-going eligibility and to describe progress.
- ◆ The Annual Primary Level Evaluation will consist of both medical and developmental components.
  - The medical component is completed by the child's primary health care provider (any physician/ARNP or public health department) prior to the IFSP meeting and will include:
    - A physical examination that is current in accordance with the EPSDT Periodicity Schedule for well child exams (see incorporated schedule at end of 911 KAR 2:120) and a medical history if one is not already on file from the initial primary level evaluation.
  - AND**
  - Hearing and vision screenings (not evaluations) completed as part of the well child exam, indicating if these two areas appear normal or abnormal or if there are concerns/no concerns with either area.
  - The developmental component is completed by a First Steps Primary Level Evaluator chosen by the family. The chosen evaluator cannot currently be providing therapeutic intervention for that child. (If there is no provider in the county of the child's residence who meets these criteria, contact your Program Consultant.) This component is completed 60 to 90 days before the annual IFSP expiration date. It will include:
    - Evaluation in the 5 developmental areas

**Annual Primary Level Evaluation Process**

1. PSC will discuss/explain the annual evaluation process with the family:
  - It has 2 components: Developmental and Medical (see explanation above).
  - Both components must be completed prior to the IFSP expiration date (if not, the IFSP expires and services stop, unless the PSC has received an extension of the current IFSP per 911 KAR 2:130 Section 2 (3) (c)).
  - It will occur 60 to 90 days before the IFSP expires.
  - It will be the same process as the Initial Primary Level Evaluation that the child had when first entering the First Steps program.
  - It is used to determine progress and continuing eligibility.
  - As usual, the family shall need to sign release forms.
  - As usual, the results of the evaluation shall be explained to the family.
2. Family or PSC obtains the needed Medical Information (history, physical, hearing screening, vision screening) from the Medical Provider
  - If child has not had a recent well child exam that meets the EPSDT Periodicity Schedule for the child's age, one should be scheduled in enough time for results to be available for the IFSP Annual Review Meeting date. (i.e. If a child will be 16 months old at the time the annual IFSP meeting is held, then the 15 month well-child exam documentation is required.)
  - If child has had the most recent well-child exam, the family obtains the information OR signs a release for the PSC to request the information from the medical provider.
3. Family chooses a Primary Level Evaluator (one not currently providing therapeutic intervention – if none available in the county of the child's residence, the PSC contacts a First Steps Program Consultant)

- If the child was premature (born at less than 37 weeks gestational age) and is under 24 months of age the Evaluator selected must be qualified to administer tools that adjust for prematurity.
4. Family signs a Release of Information form allowing the referral to be sent to the evaluator.
  5. PSC sends the referral to the Evaluator no later than 90 days before the IFSP expiration date. The referral includes:
    - A cover letter stating the purpose of the referral with reference to the child's prematurity if it is a factor, and the child's contact/demographic information.
    - A copy of the CBIS IFSP /Summary Sheet Amendment/Correction form authorizing payment for the evaluation.
    - A copy of the most recent Primary Level Evaluation (this could be the last Annual or the Initial Primary Level Evaluation).
    - A copy of the most recent CBIS IFSP Services Summary form.
  6. The Evaluator completes the evaluation, interprets the results to the family and the written report is made available to the family and current IFSP team within 14 calendar days from the date the evaluator received the complete evaluation referral. The report contains the same components as the Initial Primary Level Evaluation report. These are listed in 911 KAR 2:120 Section 1 (11).
    - ♦ **Continuing Eligibility** - A child will continue to be eligible if he/she meets initial eligibility criteria in 911 KAR 2:120 Section 2 (1 – 3) OR (4)
      - Under 3 years of age and a resident of Kentucky; and meets one of the following criteria:
        1. Significantly behind in developmental norms as evidenced by the scores being:
          - two (2.0) standard deviations below the mean in one of the five (5) skill areas; or
          - at least one and one-half (1.5) standard deviations below the mean in two (2) skill areas; or
          - below one (1.0) standard deviation below the mean in at least one (1) skill area that showed a previous score of at least one and one-half (1.5) standard deviations below the mean in that same area.
        2. Has an established Risk diagnosis identified in 911 KAR 2:120 Section 2 (3)
        3. Is being cared for by a neonatal follow-up program and its staff determine that the child meets eligibility requirements
    - ♦ **Record Review** - If the annual primary level evaluation results in the IFSP team making a recommendation for Record Review (the second tier of the evaluation system), the PSC will follow the process outlined in 911 KAR 2:120 Section 1 (9)(a-b).
      - In addition, per 911 KAR 2:120 Section 2 (2), a more in-depth standardized test should be administered and the results of this test shall be submitted with the other requirements to Record Review if the results of the developmental portion of the annual primary level evaluation reveal:
        1. A delay in one of the five skill areas that does not meet eligibility requirements; and
        2. The Evaluator, PSC or family has a concern or suspects that the child's delay may be greater than the testing revealed; and
        3. A more sensitive norm-referenced test tool may reveal a standardized score which would meet eligibility criteria; and
        4. There is one area that is of concern.
  7. If both evaluation components have been obtained and the evaluation results meet one of the program eligibility requirements, the PSC facilitates the annual IFSP meeting prior to the expiration of the current IFSP. If both components have not been obtained, all services will stop when the current IFSP

expires until a new IFSP is in place, unless the PSC has received an extension of the current IFSP per 911 KAR 2:120 Section 2 (3) (c).

8. If evaluation results show that the child does not have significant developmental delays that meet continuing program eligibility requirements, then the PSC shall:
  - A. Within three (3) days of receiving the written evaluation report, notify the service provider(s) of the results of the evaluation and that all therapeutic intervention shall cease when the current IFSP expires;
  - B. Meet with the family and notify them of the results of the evaluation.
    1. If the child does not have an Established Risk Condition:
      - a) Alert the family that when the current IFSP expires, the child and family are no longer eligible for First Steps services;
      - b) Facilitate a transition to community resources in lieu of the annual IFSP meeting per 911 KAR 2:120 Section 1 (5) (b);
      - c) Discharge the child from the program when the current IFSP expires.
      - d) Complete the CBIS Discharge Summary.
    2. If the child has an Established Risk Condition and the developmental evaluation does not indicate a delay in at least 1 skill area:
      - a) Alert the family that they may receive service coordination services (per 911 KAR 2:120 Section 1 (5) (b) (2)) until the earlier of
        - i. An annual developmental evaluation; or
        - ii. Notification that the family has a concern or suspects that the child may have a delay present that was not revealed by the testing. Further testing can then be done per 911 KAR 2:120 Section 2 (2).
      - b) Submit the CBIS IFSP Meeting Form for PSC Services only.
      - c) NOTE: If the family chooses not to receive Service Coordination services:
        - i. Discharge the child from the program after discussing available community resources per 911 KAR 2:120 Section 1 (5) (b).
        - ii. Complete the CBIS Discharge Summary.